FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS  CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) James J. Moore Name	OFFICE USE ONLY					
(2) <u>5602 SW 57th Place</u>	01-12904-019 7-ARNY (C)					
Address (number and street)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
Davie, FL 33314						
City, State, Zip Code						
☐ CHECK IF ADDRESS HAS CHANGED	(3) ID Number:					
(4) Check appropriate box(es):  ✓ Candidate (office sought): Town Councilmember, District 1						
☐ Political Committee [☐ Committee of Continuous Existence [☐ [☐ [☐ [☐ [☐ [☐ [☐ [☐ [☐ [☐ [☐ [☐ [☐						
☐ Party Executive Committee	CHECK IF CCE HAS DISBANDED					
☐ Electioneering Communication	CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED					
(5) REPORT	DENTIFIERS					
Cover Period: From 12 / 01 / 2014 To 12 / 31 / 2014 Report Type 2014 M12						
✓ Original	Report Independent Expenditure Report					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT					
Cash & Checks \$0.00	Monetary Expenditures \$ 0.00					
Loans \$ 500.00	Transfers to Office Account \$ 0.00					
Total Monetary \$ 500.00	Total					
In-Kind \$	Monetary \$ 0.00					
	(8) Other Distributions					
	\$0.00					
(9) TOTAL Monetary Contributions To Date \$ 500.00	(10) TOTAL Monetary Expenditures To Date \$0.00					
(11) CERTIFICATION						
It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)						
I certify that I have examined this report and it is true, correct, and complete.	I certify that I have examined this report and it is true, correct, and complete.					
(Type name) James J. Moore	(Type name) James J. Moore					
Individual (only for election eering commun.)  ☐ Treasurer ☐ Deputy Treasurer	Chairperson (only for PC, PTY & electioneering commun. organization)					
X	X					
Signature	Signature /					

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	James (Jim) Moore (2) I.D. Number					
(3) Cover Period	12 / 01 / 2014	through <sup>12</sup> /	31 / 2014	(4) Page		of1_
(5)	(7)	(8)	(9)	(10)	(11)	(12)
Date (6)	Full Name (Last, Suffix, First, Middle)					
Sequence	Street Address &	Contributor	Contribution	In-kind		
Number	City, State, Zip Code	Type Occupation	Туре	Description	Amendment	Amount
12 <sub>/</sub> 26 <sub>/</sub> 2014	Moore, James, J 5602 SW 57th Place Davie, FL 33314	I Insuranc e sales	loan			500.00
1						
1 1						
					ļ ,	
1 1						
·						
1 1				, , ,		
1 1						
. 1 1						

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

DS-DE 13 (Rev. 08/03)